PTO/SB/06 (08-00)
Approved for use through 10/31/2002. OMB 0651-0032
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY				OTHER TI	
FOR NUMBER FILED					NUMBER EXTRA				RATE FEE			RATE	FEE	
BASIC FEE (37 CFR 1.16(a))					**************************************				**********	*****	\$	OR		s
	AL CLAIMS OFR 1.16(c))		7	minu	s 20 =	*- ©			x \$ <u>0</u> = 0		0	OR	x \$=	
	EPENDENT CLA	JMS	3	min	ıs 3 =	· Ø			x <u>O</u> =		0	OR	x=	
					OFR 1.16(dj))				+=		OR	+=		
◆ If the difference in column 1 is less then zero, enter "0" in column 2									TOTA	AT		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								_	SMAI	LE	NTITY	OR	OTHER TI	I
AMENDMENT A		REMA AF	AIMS AINING FER DMENT		NU PREV	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RAT	Е	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ND.	Total (37 CFR 1.16(c))	*		Minus	**		=	11	x \$	_		OR	x \$=	
ME	Independent (37 CFR 1.16(b))	*		Minus	***		-	$\ \ $	x	_=		OR OR	x=	
<	FIRST PRESENTATION OF MULTIPLE I			JLTIPLE DEP	EPENDENT CLAIM (37 CFR 1.16(d))			11	+	_=		OR	+=	
(Column 1) (Column 2) (Column 3)							ΑĽ	TOTA DIT. FI			OR _A	TOTAL DDIT. FEE		
AMENDMENT B		REMA AF	AIMS AINING TER DMENT		NI PRE	GHEST UMBER VIOUSLY ID FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*		Minus	**		=		x \$	=		OR	x \$=	
ME	Independent (37 CFR 1.16(b))	*		Minus	***		=		x	J.		OR OR	x=	
<	FIRST PRES	ENTAT	ION OF M	ULTIPLE DE	PENDE	NT CLAIM	(37 CFR 1.16(d))	11	+	1 11		OR	+=	
(Column 1) (Column 2) (Column 3)								TOTAL ADDIT, FEE				OR	TOTAL DDIT. FEE	
AMENDMENT C		REM. AF	AIMS AINING TER IDMENT		PRE	GHEST UMBER VIOUSLY AID FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(e))	٠		Minus	**		=		x \$	_=		OR	x \$=	
	Independent (37 CFR 1.16(b))	*		Minus	***		=		x	_=		OR OR	x=	
~	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							1	+	-=		OR	+=	· ·
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".														

The "Highest Number Previously raid For" IN 1HIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 100 83 800														
CLAIMS AS FILED - PART I. (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER SMALL		
ТО	TAL CLAIMS		9.				RAT			FEE	1	RATE	FEE	
FO	R		NUMBER	FILED	NUMB	ER EXTRA		BASIC F	EE	370.00	OR	BASIC FEE	740.00	
ТО	TAL CHARGEA	BLE CLAIMS	9 - minus 20= * 8				X\$ 9=				OR	X\$18=		
IND	EPENDENT CL	AIMS	5 — mi			X42=			OR	X84≃				
MU	LTIPLE DEPEN	DENT CLAIM PI	PRESENT								1			
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=			OR	+280=		
CLAIMS AS AMENDED - PART II								TOTAL 370 OR TOTAL						
		(Column 1)	(Colu		(Column 3) SMAL			_L E	ENTITY	OR	OTHER SMALL I			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	; 5	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9:	=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X42=	=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J -	+140:	_		OR	+280=		
									AL			TOTAL		
	(Column 1) (Column 2) (Column 3)							ADDIT. F	EE		JON	ADDIT. FEE		
NDMENT B		CLAIMS REMAINING	7,	HIGH	IEST		1 r		П	ADDI-	.		ADDI-	
		AFTER AMENDMENT		PREVIO PAID	OUSLY	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
NDA	Total	*	Minus	**		=		X\$ 9=	=		OR	X\$18=		
AMEI	Independent	*	Minus	***		=	╽╽	X42=			OR	X84=		
<u> </u>	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	CLAIM		」	+140:	_		OR	+280=	: 4	
							L	TOT ADDIT. F	AL			TOTÁL		
	(Column 1) (Column 2) (Column 3)								EE L	***	JO. 1	ADDIT. FEE	L	
O		CLAIMS REMAINING	e majo a sumio to atom in la producti	HIGH	EST		1 г		7	ADDI-			ADDI-	
AMENDMENT C		AFTER AMENDMENT		NUM PREVI PAID	OUSLY	PRESENT EXTRA		RATE	=	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=		X\$ 9=	=		OR	X\$18=		
AME	Independent	*	Minus	***		<u> </u> =]	X42=				X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT CLAIM				┨┟		7		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										+280=				
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE														
· '	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	ent) is the	highest number	er fou	ind in the	арр	ropriate box	c in co	lumn 1.		